

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000025487

FILED  
Apr 23, 2006  
Secretary of State

Entity Name: THE FINANCIAL STABILITY GROUP, INC.

**Current Principal Place of Business:**

1691 N.W. 195TH STREET  
MIAMI, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

1691 N.W. 195TH STREET  
MIAMI, FL 33169

**New Mailing Address:**

FEI Number: 06-1680765      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TOWNSLEY, JEFFREY  
1691 N.W. 195TH STREET  
MIAMI, FL 33169 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: TOWNSLEY, JEFFREY  
Address: 1691 N.W. 195TH STREET  
City-St-Zip: MIAMI, FL 33169

Title: V ( ) Delete  
Name: GUNN, LAWRENCE  
Address: 4220 N.W. 171ST STREET  
City-St-Zip: MIAMI, FL 33055

Title: S ( ) Delete  
Name: TOWNSLEY, JAMES A JR.  
Address: 1150 N.W. 88TH STREET  
City-St-Zip: MIAMI, FL 33150

Title: T ( ) Delete  
Name: JACKSON, IRVING  
Address: 21150 N.E. MIAMI CT  
City-St-Zip: MIAMI, FL 33179

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S ( ) Change (X) Addition  
Name: SAMUAL, WATTS SR.  
Address: 9220 N.W. 15TH AVE  
City-St-Zip: MIAMI, FL 33150

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFFREY TOWNSLEY

P

04/23/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date